01/15/2016 18 : 24

PAGE 1/4

#### FEC FORM 5

#### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

4 (a) Name of Individual Oversitation on Comparation				
(a) Name of Individual, Organization or Corporation     IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUNI				
(b) Address (number and street) check if different than previously reported 2001 FOREST AVENUE				
(c) City, State and ZIP Code	3. FEC Identification Number			
DES MOINES IA 50311	3. FEG Identification Number			
	C C90013897			
Occupation and Name of Employer (for Individual Filers Only)				
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Report  January 31 Year-End Report  b) Is this Report an amendment?  No Yes, it amends the report filed on THROUGH  THROUGH  O1 / 14 / 2016				
6. TOTAL CONTRIBUTIONS	.00			
7. TOTAL INDEPENDENT EXPENDITURES	1406.76			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.				
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE [Electronically Filed]			
Matthew Covington  Matthew Covington	01/15/2016			
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.				

# SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 4 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Adam Mason	M = M / D = D / Y = Y = Y = Y
Mailing Address 2001 Forest Ave	01 15 2016
	Amount
City State Zip Code	114.75
Des Moines IA 50311	Transaction ID : F57.000001
Purpose of Expenditure staff time Category/ Type	Office Sought: House State: IA Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Nathan Malachowski  Mailing Address 2001 Forest Ave	01 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
20011 01031 AVC	Amount
City State Zip Code	126.00
Des Moines IA 50311	Transaction ID : F57.000002
Purpose of Expenditure Category/ staff time Category/	Office Sought: House State: IA Senate
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	5.80 Disbursement For: Primary General 2016 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Emily Harmon  Mailing Address 2004 Farest Ave.	01 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
2001 Forest Ave	Amount
City State Zip Code	146.32
Des Moines IA 50311	Transaction ID : F57.000003
Purpose of Expenditure Category/	Office Sought: House State: IA
Туре	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	387.07
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································

### SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE	3	OF	4	
FOR LINE 7 OF FORM 5				

NAME OF FILER (In Full) IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination **Hugh Espey** 01 15 2016 Mailing Address 2001 Forest Ave Amount City State Zip Code 389.62 Des Moines IΑ 50311 Transaction ID: F57.000004 Purpose of Expenditure IΑ Office Sought: House Category/ State: staff time Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **Bernard Sanders** X Support Check One: Oppose Disbursement For: Primary 2016 General Calendar Year-To-Date Per Election 2981.74 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Katie Bryan 01 15 2016 Mailing Address 2001 Forest Ave Amount City State Zip Code 6.77 Des Moines IΑ 50311 Transaction ID: F57.000005 IΑ Purpose of Expenditure Office Sought: House Category/ State: staff time Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **Bernard Sanders** Check One: X Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2988.51 2016 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Bridget Fagan-Reidburn 2016 01 15 Mailing Address 2001 Forest Ave Amount City State Zip Code 100.10 IΑ 50311 Des Moines Transaction ID: F57.000006 Purpose of Expenditure Office Sought: House IΑ Category/ State: staff time Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: **Bernard Sanders** X Support Check One: Oppose Disbursement For: Primary 2016 General Calendar Year-To-Date Per Election 3088.61 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 496.49 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

# SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 4 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) OWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
US Postmaster	M = M / D = D / Y = Y = Y
Mailing Address 1165 2nd Ave	01 15 2016
1100 ZIII AVO	Amount
City State Zip Code	523.20
Des Moines IA 50309	Transaction ID : F57.000007
Purpose of Expenditure postage for mailing Category/ Type	Office Sought: House State: IA Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Mailing Address	M M / D D / Y Y Y Y
Walling Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Mailing Address	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	523.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	▶ 1406.76